KNAPP HAVEN

725	KNAPP	STREET
125	I/I/I/II I	OTIVEET

CHETEK	54728	Phone: (715)	924-4891	Ownership	o:	City
Operated from	1/1 To 12/31	Days of Op	peration: 365	Highest I	Level License:	Skilled
Operate in Con	junction with	Hospital?	No	Operate i	in Conjunction with CBRF?	No
Number of Beds	Set Up and St	affed (12/31	1/02): 99	Title 18	(Medicare) Certified?	No
Total Licensed	Bed Capacity	(12/31/02):	99	Title 19	(Medicaid) Certified?	Yes
Number of Resid	dents on 12/31	/02:	91	Average I	Daily Census:	94
*****	*****	*****	*****	*****	******	*****
Services Provid	ded to Non-Res	idents	Age, Sex, an	d Primary Diagnosis	s of Residents $(12/31/02)$	l Lena

Services Provided to Non-Residents	Age, Sex, and Primary Diagn	Length of Stay (12/31/02)	용				
Home Health Care Supp. Home Care-Personal Care	No No	Primary Diagnosis		Age Groups 	% 		26.4 46.2
Supp. Home Care-Household Services	No No	Developmental Disabilities Mental Illness (Org./Psy)		Under 65	2.2 12.1	More Than 4 Years	27.5
Day Services Respite Care	No	Mental Illness (Other)	3.3	65 - 74 75 - 84	28.6	•	100.0
Adult Day Care Adult Day Health Care	No No	Alcohol & Other Drug Abuse Para-, Quadra-, Hemiplegic		85 - 94 95 & Over		******** Full-Time Equivalent	
Congregate Meals Home Delivered Meals	Yes No	•		 	100.0	Nursing Staff per 100 Res (12/31/02)	idents
Other Meals	Yes	Cardiovascular	7.7	65 & Over	97.8	i	
Transportation Referral Service	No No	Cerebrovascular Diabetes		 Sex	%	RNs LPNs	10.6 4.7
Other Services Provide Day Programming for	No	Respiratory Other Medical Conditions		 Male		Nursing Assistants, Aides, & Orderlies	45.4
Mentally Ill	No			Female	78.0	•	10.1
Provide Day Programming for Developmentally Disabled	No	 	100.0	I 	100.0	 	

Method of Reimbursement

		edicare			edicaid itle 19			Other			Private Pay	:		amily Care			anaged Care			
Level of Care	No.	o _o	Per Diem (\$)	No.	Ŷ	Per Diem (\$)	No.	%	Per Diem (\$)	No.	olo	Per Diem (\$)	No.	olo	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	Of
Int. Skilled Care	0	0.0	0	2	2.8	124	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	2	2.2
Skilled Care	0	0.0	0	60	84.5	106	0	0.0	0	17	85.0	110	0	0.0	0	0	0.0	0	77	84.6
Intermediate				9	12.7	87	0	0.0	0	3	15.0	110	0	0.0	0	0	0.0	0	12	13.2
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	0	0.0		71	100.0		0	0.0		20	100.0		0	0.0		0	0.0		91	100.0

KNAPP HAVEN

*********	****	*******	******	*****	*****	*******	*****
Admissions, Discharges, and		Percent Distribution	of Residents'	Conditi	ions, Services	, and Activities as of $12/$	31/02
Deaths During Reporting Period	- 1						
					Needing		Total
Percent Admissions from:		Activities of	%	Ass	sistance of	2	Number of
	29.3	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.0	Bathing	1.1		51.6	47.3	91
Other Nursing Homes	7.3	Dressing	11.0		71.4	17.6	91
Acute Care Hospitals	56.1	Transferring	35.2			13.2	91
Psych. HospMR/DD Facilities	0.0	Toilet Use	24.2		58.2	17.6	91
Rehabilitation Hospitals	0.0	Eating	41.8		46.2	12.1	91
Other Locations	7.3	******	*****	******	*****	*******	*****
Total Number of Admissions	41	Continence		용	Special Treat	tments	%
Percent Discharges To:	1	Indwelling Or Extern	al Catheter	2.2	Receiving 1	Respiratory Care	3.3
Private Home/No Home Health	4.3	Occ/Freq. Incontinen	t of Bladder	52.7	Receiving '	Tracheostomy Care	0.0
Private Home/With Home Health	10.9	Occ/Freq. Incontinen	it of Bowel	24.2	Receiving :	Suctioning	0.0
Other Nursing Homes	2.2				Receiving (Ostomy Care	4.4
Acute Care Hospitals	23.9	Mobility			Receiving '	Tube Feeding	1.1
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed	5.5	Receiving 1	Mechanically Altered Diets	35.2
Rehabilitation Hospitals	0.0						
Other Locations	0.0	Skin Care			Other Resider	nt Characteristics	
Deaths	58.7	With Pressure Sores		2.2	Have Advance	ce Directives	93.4
Total Number of Discharges	1	With Rashes		6.6	Medications		
(Including Deaths)	46				Receiving 1	Psychoactive Drugs	48.4

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

		Own	ership:		Size:		ensure:					
	This	Gov	ernment	50	-99	Ski	lled	Al	1			
	Facility	Peer	Group	Peer	Group	Peer	Group	Faci	lities			
	%	90	Ratio	olo	Ratio	90	Ratio	olo	Ratio			
Occupancy Rate: Average Daily Census/Licensed Beds	94.9	84.6	1.12	88.5	1.07	86.7	1.10	85.1	1.12			
Current Residents from In-County	83.5	55.3	1.51	72.5	1.15	69.3	1.20	76.6	1.09			
Admissions from In-County, Still Residing	56.1	26.2	2.14	19.5	2.88	22.5	2.50	20.3	2.76			
Admissions/Average Daily Census	43.6	60.4	0.72	125.4	0.35	102.9	0.42	133.4	0.33			
Discharges/Average Daily Census	48.9	64.0	0.76	127.2	0.38	105.2	0.46	135.3	0.36			
Discharges To Private Residence/Average Daily Cens	us 7.4	19.7	0.38	50.7	0.15	40.9	0.18	56.6	0.13			
Residents Receiving Skilled Care	86.8	85.5	1.02	92.9	0.93	91.6	0.95	86.3	1.01			
Residents Aged 65 and Older	97.8	88.5	1.11	94.8	1.03	93.6	1.04	87.7	1.12			
Title 19 (Medicaid) Funded Residents	78.0	79.1	0.99	66.8	1.17	69.0	1.13	67.5	1.16			
Private Pay Funded Residents	22.0	16.2	1.36	22.7	0.97	21.2	1.04	21.0	1.04			
Developmentally Disabled Residents	0.0	0.5	0.00	0.6	0.00	0.6	0.00	7.1	0.00			
Mentally Ill Residents	51.6	48.2	1.07	36.5	1.42	37.8	1.36	33.3	1.55			
General Medical Service Residents	18.7	20.0	0.93	21.6	0.86	22.3	0.84	20.5	0.91			
Impaired ADL (Mean)	49.9	44.1	1.13	48.0	1.04	47.5	1.05	49.3	1.01			
Psychological Problems	48.4	62.8	0.77	59.4	0.81	56.9	0.85	54.0	0.90			
Nursing Care Required (Mean)	6.6	7.5	0.88	6.3	1.05	6.8	0.97	7.2	0.92			